**PSYCHOTHERAPY THEORY AND RESEARCH, 575 – SPRING 2014**

Stewart Shankman, Ph.D.

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**TIME**: Thursdays 2:00PM-5:00PM **LOCATION**: BSB 1077

**GOAL**: To familiarize you with current concepts and research in psychotherapy theory and research.

**FORMAT**: The class will consist of a combination of lecture and discussion, and it is expected that all students will be prepared and participate actively in class. Class will work great if all students have thought about the material and are ready with one written question that they would like to discuss. We might not get to everyone’s question, but you will find that the process of formulating this question will be a useful exercise. The first half of the course will cover the basics of psychotherapy process and outcome research and will review the major psychotherapy orientations that have empirical support. The second half will cover the research on empirically supported psychotherapies of various forms of psychopathology. This is not a practicum course so we will not discuss the “how to” of these techniques, but rather will cover the research surrounding them.

**READINGS**: The required readings, listed below, consist of 4-5 papers per week. The readings are intended to provide greater depth on selected topics of particular importance. Please make the time to read each of the assigned articles before the class for which they are assigned. While some of the articles are review papers, many are reports of original research. These are intended to illustrate some of the innovative approaches and methods in current psychopathology research. Some of the readings will be difficult for those without a background in the relevant area or methodology, so don’t be discouraged if you have to struggle with them. Focus on the main questions, findings, and implications of the papers and don’t worry if you can’t fully grasp the more technical details.

You may want to consider purchasing this book as it is an excellent resource and several of the readings come from it.

Lambert, M.J. (2013). *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change (56h ed.).* New York: John Wiley & Sons.

The reading list, as well as some articles available in PDF, will be posted on the BlackboardTM webpage for the class. Blackboard’s website is <https://blackboard.uic.edu/> and your email password should work for your login. Other articles and book chapters will be made available for you to photocopy.

You may find it useful to read the relevant sections from the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders,* 5th Edition (DSM-5), although I am not assigning it. This will be particularly important for the second half of the class. If you are interested in keeping abreast of current developments in this area, the journal *Journal of Consulting and Clinical Psychology* is generally recognized as the leading journal in the field, though psychiatry journals like *JAMA: Psychiatry* and *American Journal of Psychiatry* often publish important psychotherapy process and outcome studies.

**REQUIREMENTS**: Along with the required readings and one written question, the class requirements include two non-cumulative exams intended to primarily help you keep up with, and absorb the material. Each exam will consist of in class essays and short answer and is worth 32.33% of your final grade.

Each of you will also do a class presentation during either of the last two weeks of the semester (April 24 and May 1). These presentations will be on the research on empirically supported treatments for various conditions or with certain populations. We will discuss these in more detail throughout the semester. This presentation is worth 32% of your grade.

To summarize, your grade will be based on your midterm (32.33%), final (32.33%), end of semester presentation (32.33%), and your class participation and WRITTEN questions that you hand in every week (3.01%).

**FINAL POINT**: Lastly, an overall goal of this course is to develop critical thinking skills. Because the field changes over time and “facts” may not be truth after empirical disconfirmation, it is vital that you develop critical and skeptical thinking skills so that you can read the literature in an informed manner and be able to a) formulate testable research hypotheses in the area of psychotherapy research and b) be an informed consumer of the research on psychotherapy. My hope is that you will find this class and its material very interesting and exciting. Much of what we will cover in this class is the backbone of a scientifically informed clinical psychology and is the basis of this graduate program.

Please feel free to email, call or stop by my office to discuss any issues regarding the format, content, or process of the course.

**Dates Topic\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 PART I – GENERAL TOPICS IN PSYCHOTHERAPY RESEARCH

1/16/2014 Research Methods and the therapeutic change process

1/23/2014 The EST movement, Effectiveness vs. Efficacy; clinical vs. actuarial prediction

1/30/2014 Psychodynamic and Interpersonal psychotherapy

2/6/2014 Experiential psychotherapy and Mindfulness/ACT

2/13/2014 Therapist and other common factors of psychotherapy; treatment matching

 PART II – EMPIRICALLY SUPPORTED TREATMENTS OF . . .

2/20/2014 Adult mood disorders

2/27/2014 **LIKELY MAKE-UP WEEK** / **REVIEW FOR MIDTERM**

3/6/2014 MIDTERM

3/13/2014 Panic Disorder, OCD, Specific Phobias

3/20/2014 Social-evaluative anxiety/social phobia and unassertiveness

3/27/2014 SPRING BREAK – CLASS DOES NOT MEET

4/3/2014 Personality disorders

4/10/2014 Alcohol and substance use disorders

4/17/2014 ADHD and childhood/adolescent conduct problems

4/24/2014 CLASS PRESENTATIONS

5/1/2014 CLASS PRESENTATIONS (CONTINUED)

5/??/2014 FINAL EXAM

CLASS PRESENTATION TOPICS - 1. autism and developmental disabilities; 2. PTSD, 3. GAD; 4. cross-cultural/diversity issues in psychotherapy, 5. Therapy with geriatric populations, 6. Sexual disorders/dysfunctions – enuresis/encopresis, 7. psychotherapy for individuals with psychosis, 8. Marital discord, 9. Childhood depression and anxiety conditions (e.g., separation anxiety), 10. Eating disorders.

**Week 1 -Research Methods and the therapeutic change process**

Comer, J.C., & Kendall, P.C. (2013). Methodology, design, and evaluation in psychotherapy research (pp. 3-20). In M.J. Lambert. (Ed.), *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change (6th ed.).* New York: John Wiley & Sons.

Gaudiano, B.A., & Miller, I.W. (2013). The future of evidence-based practice in psychotherapy: Facing the challenges that lie ahead. *Clinical Psychology Review, 33*, 813–824.

Chambless, D.L., Crits-Christoph, P., Wampold, B.E., Norcross, J.C., Lambert, M.J., Bohart, A.C., et al. (2006). What should be validated? (pp. 191-256). In J.C. Norcross, L.E. Beutler, & R.F. Levant (Eds*.), Evidence-based practices in mental health: Debate and dialogue on the fundamental questions*. Washington, DC, APA.

Goldfried, M.R., & Davila, J. (2005). The role of relationship and technique in therapeutic change. *Psychotherapy: Theory, Research, Practice, Training,* *42*, 421-430.

**Week 2 - The EST movement, Effectiveness vs. Efficacy; clinical vs. actuarial prediction**

Chambless, D. L., & Ollendick, T. H. (2001). Empirically supported psychological interventions: Controversies and evidence. *Annual Review of Psychology, 52*, 685-716.

Also see following websites: (div 12 and div 53, respectively)

http://www.psychologicaltreatments.org/ http://www.effectivechildtherapy.com/

Westen, D., Novotny, C.M., &Thompson-Brenner, H. (2004). The empirical status of empirically supported psychotherapies: Assumptions, findings, and reporting in controlled clinical trials. *Psychological Bulletin, 130*, 631-663.

Lilienfeld, S.O., Ritschel, L.A., Lynn, S.J., Cautin, R.L., & Latzman, R.D. (2013). Why many clinical psychologists are resistant to evidence-based practice: Root causes and constructive remedies. *Clinical Psychology Review, 33*, 883-900.

Baardsetha, T.P., et al., (2013). Cognitive-behavioral therapy versus other therapies: Redux. *Clinical Psychology Review, 33*, 395-405.

Garb, H.N. (2005). Clinical judgment and decision making. *Annual Review of Clinical Psychology, 1*, 67-89

 OPTIONAL: *Articles on Clinical Significance that would be good to read if you haven’t for other classes*

Kazdin, A.E. (1999). The meanings and measurement of clinical significance. *Journal of Consulting and Clinical Psychology, 67*, 332-339.

McGlinchey, J. B., Atkins, D. C., & Jacobson, N. S. (2002). Clinical significance methods: Which one to use and how useful are they? *Behavior Therapy, 33*, 529-550

OTHER OPTIONAL

Grove, W.M., Zald, D.H., Lebow, B.S., Snitz, B.E., & Nelson, C. (2000) Clinical versus mechanical prediction: A meta-analysis. *Psychological Assessment, 12*, 19-30.

**Week 3 - Psychodynamic and Interpersonal psychotherapy**

Barber, J.P., Muran, J.C., McCarthy, K.S., & Keefe, J.R. (2013). Research on dynamic therapies (pp. 443-494). In M.J. Lambert. (Ed.), *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change (6th ed.).* New York: John Wiley & Sons.

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Hilliard, R.B., Henry, W.P., & Strupp, H.H. (2000). An interpersonal model of psychotherapy: Linking patient and therapist developmental history, therapeutic process, and types of outcome. *Journal of Consulting and Clinical Psychology, 68*, 125-133.

Goldfried, M.R., Castonguay, L.G., Hayes, A.M., Drozd, J.F., & Shapiro, D.A. (1997). A comparative analysis of the therapeutic focus in cognitive-behavioral and psychodynamic-interpersonal sessions. *Journal of Consulting and Clinical Psychology, 65*, 740-748.

Connolly Gibbons, M.B., Crits-Christoph, P., Barber, J.P., Wiltsey Stirman, S., Gallop, R., Goldstein, L.A., et al. (2009). Unique and common mechanisms of change across cognitive and dynamic psychotherapies. *Journal of Consulting and Clinical Psychology, 77*, 801-813.

Cutler, J.L., Goldyne, A., Markowitz, J.C., Devlin, M.J., Glick, R.A. (2004). Comparing cognitive behavior therapy, interpersonal psychotherapy, and psychodynamic psychotherapy. *American Journal of Psychiatry, 161*, 1567-1573.

**Week 4 - Experiential psychotherapy and Mindfulness/ACT**

Greenberg, L.S., & Malcolm, W. (2002). Resolving unfinished business: Relating process to outcome. *Journal of Consulting and Clinical Psychology, 70*, 406-416.

Hofmann, S.G., & Asmundson, G.J. (2008). Acceptance and mindfulness-based therapy: New wave or old hat? *Clinical Psychology Review, 28*, 1-16.

Hayes, S.C., Levin, M.E., Plumb-Vilardaga, J., Villatte, J.L., & Pistorello, J. (2013). Acceptance and commitment therapy and contextual behavioral science: Examining the progress of a distinctive model of behavioral and cognitive therapy. *Behavior Therapy*, 44, 180–198

Watson, J.C., & Bedard, D.L. (2006). Clients' emotional processing in psychotherapy: A comparison between cognitive-behavioral and process-experiential therapies. *Journal of Consulting and Clinical Psychology*, *74* 152-159.

Elliott, R., Greenberg, L. S., Watson, J., Timulak, L., & Freire, E. (2013). Research on humanistic-experiential psychotherapies (pp. 495-538). In M.J. Lambert. (Ed.), *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change (6th ed.).* New York: John Wiley & Sons.

**Week 5 - Therapist and other common factors of psychotherapy; treatment matching**

Baldwin, S.A., & Imel, Z.E. (2013). Therapist effects: findings and methods (pp. 258-297). In M.J. Lambert. (Ed.), *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change (6th ed.).* New York: John Wiley & Sons.

Watson, J.C., & McMullen, E.J. (2005). Examination of therapist and client behavior in high- and low-alliance sessions in cognitive-behavioral therapy and process experiential therapy. *Psychotherapy: Theory, Research, Practice, Training, 42*, 297-310.

DeRubeis, R.J., Brotman, M.A., & Gibbons, C.J. (2005). A conceptual and methodological analysis of the nonspecifics argument. *Clinical Psychology: Science and Practice, 12*, 174-183.

Ablon, J.S., & Jones, E.E. (2002). Validity of controlled clinical trials of psychotherapy: Findings from the NIMH Treatment of Depression Collaborative Research Program. *American Journal of Psychiatry, 159*, 775-783.

Bell, E.C., Marcus, D.K., & Goodlad, J.K. (2013). Are the parts as good as the whole? A meta-analysis of component treatment studies. *Journal of Consulting and Clinical Psychology, 81*, 722-736.

**Week 6 - Adult mood disorders**

Hollon, S. D., DeRubeis, R. J., Shelton, R. C., Amsterdam, J. D., Salomon, R. M., O'Reardon, J. P., et al. (2005). Prevention of relapse following cognitive therapy vs medications in moderate to severe depression. *Archives of General Psychiatry, 62*, 417-422.

Dimidjian, S., Hollon, S.D., Dobson, K.S., Schmaling, K.B, Kohlenberg, R.J, Addis, M.E., et al. (2006). Randomized trial of behavioral activation, cognitive therapy, and antidepressant medication in the acute treatment of adults with major depression. *Journal of Consulting and Clinical Psychology, 74*, 658-670.

Kanter, J.W., Manos, R.C., Bowe, W.M., Baruch, D.E., Busch, A.M., & Rusch, L.C. (2010). What is behavioral activation? A review of the empirical literature. *Clinical Psychology Review*, 30, 608-620.

Miklowitz, D.J., Otto, M.W., Frank, E., Reilly-Harrington, N.A., Kogan, J.N., Sachs, G.S., et al. (2007). Intensive psychosocial intervention enhances functioning in patients with Bipolar Depression: Results from a 9-month randomized controlled trial. *American Journal of Psychiatry, 164*, 1340-1347.

Teasdale, J.D., Scott, J., Moore, R.G., Hayhurst, H., Pope, M., & Paykel, E.S., (2001). How does cognitive therapy prevent relapse in residual depression? Evidence from a controlled trial. *Journal of Consulting & Clinical Psychology*, *69*, 347-357.

Watson, J.C., Gordon, L.B., Stermac, L., Kalogerakos, F., & Steckley, P. (2003). Comparing the effectiveness of process-experiential with cognitive-behavioral psychotherapy in the treatment of depression. *Journal of Consulting & Clinical Psychology*, *71*, 773-781

\*\*OPTIONAL\*\*

Riso, L.P., & Newman, C.F. (2003). Cognitive therapy for depression. *Journal of Clinical Psychology, 59*, 817-831.

**Week 7 - MIDTERM**

**Week 8 - Panic Disorder, OCD, Specific Phobias**

Gloster, A.T., Wittchen, H.U., Einsle, F., Lang, T., Helbig-Lang, S., Fydrich, T., … Arol, V. (2011). Psychological treatment for panic disorder with agoraphobia: A Randomized controlled trial to examine the role of therapist-guided exposure in situ in CBT. *Journal of Consulting and Clinical Psychology, 79*, 406-420.

Siev, J., & Chambless, D.L. (2007). Specificity of treatment effects: Cognitive therapy and relaxation for generalized anxiety and panic disorders. *Journal of Consulting and Clinical Psychology, 75*, 513-522.

Foa, E.B., Liebowitz, M.R., Kozak, M.J., Davies, S., Campeas, R., Franklin, M.E., et al. (2005). Randomized, placebo-controlled trial of exposure and ritual prevention, clomipramine, and their combination in the treatment of obsessive-compulsive disorder. *American Journal of Psychiatry, 162*, 151-161

Abramowitz, J.S., Taylor, S., & McKay, D. (2005). Potentials and limitations of cognitive treatments for obsessive-compulsive disorder. *Cognitive Behaviour Therapy, 34*, 140-147.

Arch, J.J,. & Ayers, C.R. (2013). Which treatment worked better for whom? Moderators of group cognitive behavioral therapy versus adapted mindfulness based stress reduction for anxiety disorders. *Behaviour Research and Therapy, 51*, 434–442

**Week 9 - Social-evaluative anxiety/social phobia and unassertiveness**

McMillan, D., & Lee, R. (2010). A systematic review of behavioral experiments vs. exposure alone in the treatment of anxiety disorders: A case of exposure while wearing the emperor's new clothes? *Clinical Psychology Review, 30*, 467-478.

Clark, D.M., Ehlers, A., Hackmann, A., McManus, F., Fennell, M., Grey, N., et al. (2006). Cognitive therapy versus exposure and applied relaxation in social phobia: A randomized controlled trial. *Journal of Consulting and Clinical Psychology, 74*, 568-578.

Herbert, J.D., Gaudiano, B.A., Rheingold, A.A., Myers, V.H., Dalrymple, K., & Nolan, E.M. (2005). Social skills training augments the effectiveness of cognitive behavioral group therapy for social anxiety disorder. *Behavior Therapy, 36*, 125-138.

McCullough, J.P. (2003). Treatment for chronic depression using cognitive behavioral analysis system of psychotherapy (CBASP). *Journal of Clinical Psychology, 59*, 833-846.

Leichsenring, F., et al. (2013). Psychodynamic therapy and cognitive-behavioral therapy in social anxiety disorder: A Multicenter randomized controlled trial. *American Journal of Psychiatry, 170*, 759-767.

Amir, N., & Taylor, C.T. (2012). Interpretation training in individuals with generalized social anxiety disorder: A randomized controlled trial. *Journal of Consulting and Clinical Psychology, 80*, 497-511.

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Clark, D.A. & Taylor, S. (2009). The transdiagnostic perspective on cognitive-behavioral therapy for anxiety and depression: New wine for old wineskins? *Journal of Cognitive Psychotherapy, 23*, 60-66.

**Week 10 – SPRING BREAK. CLASS DOES NOT MEET**

**Week 11 - Personality disorders**

Linehan, M.M., Comtois, K.A., Murray, A.M., Brown, M.Z., Gallop, R.J., Heard, H.L., et al. (2006). Two-year randomized controlled trial and follow-up of dialectical behavior therapy vs. therapy by experts for suicidal behaviors and borderline personality disorder. *Archives of General Psychiatry, 63*, 757-766

McMain, S., Korman, L.M., & Dimeff, L. (2001). Dialectical behavior therapy and the treatment of emotion dysregulation. *Journal of Clinical Psychology, 57*, 183-196.

Bedics, J.D., Atkins, D.C., Comtois, K.A., & Linehan, M.M. (2012). Treatment differences in the therapeutic relationship and introject during a 2-year randomized controlled trial of dialectical behavior therapy versus nonbehavioral psychotherapy experts for borderline personality disorder. *Journal of Consulting and Clinical Psychology, 80*, 66-77.

Marques, J.K., Wiederanders, M., Day, D.M., Nelson, C., & van Ommeren, A. (2005). Effects of a relapse prevention program on sexual recidivism: Final results from California's sex offender treatment and evaluation project (SOTEP). *Sexual Abuse: A Journal of Research and Treatment, 17*, 79-107.

\*\*OPTIONAL\*\*

**Linehan, M.M. (1998). An illustration of dialectical behavior therapy**. *In Session: Psychotherapy in Practice, 4*, 21-44.

**Week 12 - Alcohol and substance abuse and dependence**

Project Match Research Group. (1997). Matching alcoholism treatments to client heterogeneity: Project MATCH three-year drinking outcomes. *Journal of Studies of Alcohol, 58*, 7-29.

Hallgren, K.A., & Moyers, T.B. (2011). Does readiness to change predict in‐session motivational language? Correspondence between two conceptualizations of client motivation. *Addiction, 106,* 1261-1269.

Moyers, T.B., Martin, T., Houck, J.M., Christopher, P.J., & Tonigan, J.S. (2009). From in-session behaviors to drinking outcomes: A causal chain for motivational interviewing. *Journal of Consulting and Clinical Psychology, 77*, 1113-1124.

Greenfield, B.L., & Tonigan, J. S (2013). The general Alcoholics Anonymous tools of recovery: The adoption of 12-step practices and beliefs. *Psychology of Addictive Behaviors, 27*, 553-561.

Logan, D., E. & Marlatt, G.A. (2010). Harm reduction therapy: a practice-friendly review of research. *Journal of Clinical Psychology, 66,* 201-214.

**Week 13 - ADHD and childhood/adolescent conduct problems**

Owens, E.B., Hinshaw, S.P., Kraemer, H.C., Arnold, L.E., Abikoff, H.B., Cantwell, D.P., et al. (2003). Which treatment for whom for ADHD? Moderators of treatment response in the MTA. *Journal of Consulting and Clinical Psychology, 71*, 540-552.

Weisz, J.R., Ng, M.Y., Rutt, C., Lau, N., & Masland, S. (2013). Psychotherapy for children and adolescents (pp. 541-586). In M.J. Lambert. (Ed.), *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change (6th ed.).* New York: John Wiley & Sons.

Weisz, J.R., et al. (2012). Testing standard and modular designs for psychotherapy treating depression, anxiety, and conduct problems in youth: A Randomized effectiveness trial. *Archives of General Psychiatry, 2012*, 274-282.

Liddle, H.A., Rowe, C.L., Dakof, G.A., Henderson, C.E., & Greenbaum, P.E. (2009). Multidimensional family therapy for young adolescent substance abuse: Twelve-month outcomes of a randomized controlled trial. *Journal of Consulting and Clinical Psychology, 77*, 12-25.

**Week 14 – CLASS PRESENTATIONS (TOPICS TO BE ASSIGNED)**

**Week 15 – CLASS PRESENTATIONS (TOPICS TO BE ASSIGNED)**

**Finals Week – FINAL EXAM**